

9/28/00
SUN INTERNAL TRANSFER REQUEST FOR S.N.

9/28/00

09/6/2, 359

DATE: <u>12/08/2000</u>	FROM: <u>BINH TIEU (2643)</u> (pri)
FORWARD TO: A. Art Unit: <u>2682</u> B. Class: <u>455</u> C Subclass: _____	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s): _____
	<input type="checkbox"/> (check box)
	<input type="checkbox"/> (check box)
	<input type="checkbox"/> (check box)

FURTHER EXPLANATION IF NEEDED:

WIRELESS COMM. NETWORK WITH CALLER ID

DATE: _____	FROM: _____	(print)
FORWARD TO:	REASON(S):	
A. Art Unit: _____	<input type="checkbox"/>	(check box)
B. Class: _____	<input type="checkbox"/>	(check box)
C Subclass: _____	<input type="checkbox"/>	(check box)
D. See Claim(s): _____		

FURTHER EXPLANATION IF NEEDED:

DATE: _____	FROM: _____ (print)
<p>FORWARD TO CLASSIFIER</p> <p>REASON(S):</p> <p>A. You had Parent B. See Title C. See Abstract D. See Claim(s):</p> <p><input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box)</p>	

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

DATE: _____	CLASSIFIER: _____
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	<p>REASON(S):</p> <p>A. You had Parent B. See Title C. See Abstract D. See Claim(s): _____</p> <div style="display: flex; justify-content: space-between;"> <div style="flex: 1;"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div> <div style="flex: 1; text-align: right;"> CHECK DOKI CHECK DOKI CHECK DOKI </div> </div>

FURTHER EXPLANATION IF NEEDED: